## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

Anti-Helicobacter vaccine complex

TORNEY DOCKET NO. TORO 0101 PUS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:\*

Appropriate - For Use Without Specification Attached	the specification of which is		e following box is checked:	ed			
- chcsarbb	States Application Nu	or					
	PCT International Ap	— ((6 · · · )   · · ·   1 · · ·					
	and was amended on.	(if applicable).					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.36.  I do not know and/on control to the						
	application for patent or inv priority is claimed:	entor's certificate having	a filing date before that of	the application on which			
Ø	Prior Foreign Application(s	e)	175	Priority Claimed			
Rusert Priority	96 02445	FRANCE	02/25/1997	M D			
Information (If appropriate)	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
W	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
T.J	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
	I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.						
	(Application Number)		(Filing Date)				
	(Application Number)		(Filing Date)				
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More Than 12 Months (6 Months for Designs) Prior To The Filing Date of This Application:  Country  Date of Filing (Month/Day/Year)						
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application:						
	(Application Number)	(Filing I	Date) (Status — ps	stented, pending, abandoned)			
*NOTE: Must be completed.							
Page 1 of 2	(Application Number)	(Filing I	Date) (Status — ps	tented, pending, abandoned)			

I hereby appoint the owing attorneys to prosecute this application and/or an international application based on this micration and to transact all business in the atent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assigned provides said attorneys with a written notice to the contrary:

John A. Artz, Reg. No. 25,824; John S. Artz, Reg. No. 36,431; Kevin G. Mierzwa, Reg. No. 38,049; Robert P. Renke, Reg. No. 40,783

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Page 2 of 2 (USPTO Approved 3-90) (Revised 8-95) Send Correspondence to:

John A. Artz LYON & ARTZ, PLC 28333 Telegraph Road, Suite 250 Southfield, MI 48034

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or

100	oth, under Section 1001 of Title 18 of the United States Code and that such willful false statements may eopardize the validity of the application or any patent issued thereon.					
Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This Document is Signed	GIVEN NAME Fernand Narbey (TOROSSIAN	INVENTOR'S SIGNATURE	lyt.	DATE* July 17, 1997		
Insert Residence Insert Citizenship	TOULOUSE France	CITIZENSHIP French				
Insert Post Office Address	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)  10 rue Noël Ballay, 31400 TOULOUSE; France					
Full Name of Second Inventor, if any:	GIVEN NAME FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
(1)	Residence (City, State & Opuntry)	CITIZENSHIP				
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)					
F me of Third tor, if any:	GIVEN NAME FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	Residence (City, State & Country)	CITIZENSHIP				
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Fourth Inventor, if any: see above	GIVEN NAME PAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	Residence (City, State & Country)	CITIZENSHIP				
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Fifth Inventor, if any: see above	GIVEN NAME FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	Residence (City, State & Country)	CITIZENSHIP				
*Note: Must be completed — date this document is signed.	POST OFFICE ADDRESS (Complete Street Address inclu	uding City, State & Country)				